


06-07 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000110730	
1. Entity Name AMBASSADOR PAVERS, INC.	

FILED

03 JUN -5 PM 12:53

SEAL OF THE STATE OF FLORIDA
TALLAHASSEE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 623 E. ATLANTIC BLVD Suite Apt. #, etc. 6192 City & State POMPANO BEACH, FL Zip 33060 Country USA	3. Mailing Address 623 E. ATLANTIC BLVD Suite Apt. #, etc. 6192 City & State POMPANO BEACH, FL Zip 33060 Country USA
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DO NOT WRITE IN THIS SPACE	4. FEI Number 65-0977790		Applied For <input type="checkbox"/> Not Applicable
	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
	7. Name and Address of Current Registered Agent		
	Name WILLIAM J. RICE Street Address (P.O. Box Number is Not Acceptable) 2414 HARDING STREET City HOLLYWOOD FL Zip Code 33020		

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE William J. Rice DATE 6-3-03
(NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WILLIAM J. RICE 2414 HARDING STREET HOLLYWOOD, FL 33020	TITLE NAME STREET ADDRESS CITY-ST-ZIP	06/05/03--01024--011 **150.00 400020539874 06/05/03--01024--012 **150.00 400020539874 06/05/03--01024--013 **150.00 400020539874 06/05/03--01024--014 **150.00 400020539874
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: William J. Rice DATE 6-3-03 DAYTIME PHONE # 954-410-3890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

gr 6/5

Ambassador Pavers, Inc.

623 E Atlantic Blvd #6192

Pompano Beach, FL 33060

954-410-3890 Tel

954-923-5300 Fax

June 3, 2003

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

RE: Reinstatement
Ambassador Pavers, Inc.
Document # P99000110730
FEI Number: 65-0977790

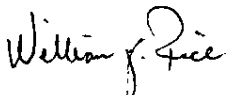
To Whom It May Concern:

At time of incorporation, address provided was temporary therefore correspondences were not received. Please allow for reinstatement by accepting annual payments for previous years, excluding penalties.

Your consideration to above reason for oversight is appreciated.

Thanking you in advance.

Regards,



William J. Rice
President